INSTALLATION, CONSTRUCTION, ALTERATION, AND/OR REPAIR ~~PERMIT~~ APPROVAL

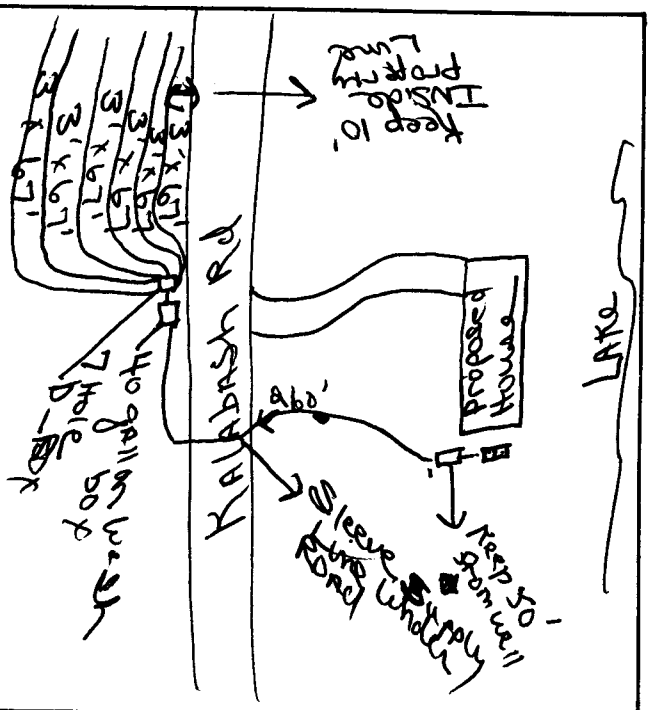
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

FILE: 345B/825TA DATE: 8/5/94

TC: 217 381-07 PO ☐ L

SERIAL Nº 15843

Permission is hereby given to ✓ Install or Construct, _____ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in the application dated 12/6/93. All work shall be completed on or before 9/5/94 after which date this permit shall be null and void. The system shall meet all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of the granting of this permit. A Certificate of Completion or an Operation Permit must be obtained from the Mecklenburg County Health Department before any system can be covered up or placed into service. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.



PLOT OF SYSTEM

Liquid Capacity of Septic Tank 1500 gallons

Liquid Capacity of Dosing Tank 1000 gallons

Tank Construction PCC

Absorption and/or Nitrification Lines:

Trench Width 3 feet

Total Line Length 400' feet

Number of Lines (5) 3 x 80' OR (6) 3 x 67'

Depth of Stone 12 inches

Distance from House 15 feet

Distance from Property Line 10 feet

Distance from Well 50' feet

NAME OF OWNER Ron D. Shafer

LOCATION OF PROPERTY 8217 Kalabash Rd

Comments: INSTALL 40 gallon Wash box 7 Hole D-Box May install 5 Trenches 3' x 80' x 12" Stone if Topography And Space Allow, or 6 Trenches 3' x 67' x 12" Stone.

Ami H Newell, RS for S. Daniel
Division or Section Head

Judy J Kiser R.S.
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Mecklenburg County Health Department in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

WHITE - HEALTH DEPARTMENT'S COPY • CANARY - ENVIRONMENTALIST'S COPY • PINK - OWNER OR AGENT'S COPY



18217 KALABASH RD

21718144

12/18/2007

duponbj

Groundwater and Wastewater Services File Imaging Project
May 2007
Barcode Font = IDAutomationHC39M

CERTIFICATE OF COMPLETION/~~OPERATION PERMIT~~

4002

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON ST., SUITE 211
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 3456/8237A DATE: 5-26-95

TC: 217-181-07 90 L ~~CRT~~

SERIAL Nº 16249

Name of Owner Ron D. Shafer Juris.:

Address of Property 18217 Kalabash Road

Inspection Data:

Tank Material PCC

Total Length of Drainfield 400' ✓

Number of Lines 6 @ 67' ✓

Cover Depth 12" ✓

Water Supply Source well

Distance to Water Source 50'-supply line
100'-drainfield

Excavation Inspected 8/8/94 ✓

Tank(s) Inspected 5-26-95 CT

Wash Line Inspected N/A

High Water Alarm Inspected 5-26-95 CT

PLOT

Design 1995, 1500ST, 1000 OT, PI, CON, 1200SF, T, 126 ✓ANCE CTR# W.T. Norwood

The undersigned has inspected the Septic Tank System described above, and certifies it has been

- [X] installed or constructed
- [ ] altered or repaired
- [X] in accordance with the permit issued
- [ ] as detailed in the plot above

and meets the provisions of I5A NCAC 18A. 1900, "Laws And Rules For Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. This issuance of this

- [ ] Certificate of Completion
- [X] Operation Permit

does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of I5A NCAC 18A. 1990 in addition to those listed below under "COMMENTS." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the suspension/revocation of this permit.

COMMENTS: System designed for 3 bedroom home - Type III B

/Bateman for Shamel, Program Chief, 5-31-95

Judy J. Kiser, R.S. / K. Thompson, R.S.
Environmental Health Specialist

Mecklenburg County services are available without regard to ethnic origin, sex, or disability.

MECKLENBURG COUNTY HEALTH DEPARTMENT
Environmental Health Division
Groundwater & Wastewater Services

June 13, 2005

Ronald Schafer
18217 Kalabash Road
Charlotte, NC 28278

Dear Mr. Schafer:

Re: Bacteriological Well Sample Results / Septic Inspection Report

Enclosed you should find a copy of the laboratory analysis of the well water sample that was collected at 18217 Kalabash Road on June 8, 2005. The laboratory analysis of the well water sample was reported to be NEGATIVE for total coliform bacteria.

Enclosed you should also find a copy of the report for the septic system inspection that was conducted on June 8, 2005.

Please contact me at (704) 336-5568 if you have any questions.

Sincerely,

Trevor Thomason, R.S.I.
Managed Systems Program Coordinator
Groundwater & Wastewater Services

Enclosures: (2)

CHARLOTTE.
CHARLOTTE-MECKLENBURG UTILITIES

Laboratory Analysis Report
Report Date: 6/13/2005 10:20 AM

LABORATORY SERVICES DIVISION

LOCATION: GWS-345B 18217 Kalabash Rd.
LOC ID: G-PME
SAMPLE DATE-TIME: 6/8/2005 16:00
SAMPLE DESCRIPTION: Grab

SAMPLE ID: AB38961
CHAIN OF CUSTODY #: 05060176

	Parameter	Result	Units	RL	Method	Start Date/ Time	Analyst
AB38961	**E. COLI-PA**	**absent**	**P/A**		SM 9223B	6/9/2005 9:25	KEK
AB38961	**Total Coliform**	**absent**	**P/A**		SM 9223B	6/9/2005 9:25	KEK

Comment:

Laboratory Supervisor: _____

Laboratory Certifications: McAlpine NC DENR No.148; Brookshire NC DENR No.162; Hal Marshall N.C. DENR No. 192, N.C. DHHS Laboratory No. 37527

CHARLOTTE-MECKLENBURG UTILITIES - LABORATORY SERVICES DIVISION

Hal Marshall Laboratory, 700 North Tryon St., Charlotte, NC 28202, 704/336-5460

CHAIN OF CUSTODY RECORD

CLIENT: MECKLENBURG COUNTY, LUESA - GROUNDWATER AND WASTEWATER SERVICES

FACILITY: GROUNDWATER (Potable Water)

LOCATION / ADDRESS: 18217 Kalabash Rd. Charlotte NC 28278

LAB CODE (circle one): REAL PRIV NEW TNC MPL (PME) OTHER

Send Report To: Trevor Thomason, 700N Tryon St. Ste. 205, Charlotte, NC 28202

COC#: 05060176

Sampled By (Print Name): Trevor Thomason

AB35961

SAMPLE ID	Sample Collector's Initials	Sample Collection: Begin Date and Time	Sample Collection: End Date and Time	Chlorinated System	Sample Temperature: Collection Temp	Sample Temperature: Receipt Temp	Sample Type: Depth Composite	Sample Type: Auto Composite	Sample Type: Hand Comp	Sample Type: Grab	Sample Containers: Plastic	Sample Containers: Glass	Sample Containers: # Containers	Chemical Preservative: None	HNO3	H2SO4	NaOH	HCl	Na2S2O3	pH Correct	Analyses Requested: Total Coliform	Nitrate	Nitrite	Nitrate + Nitrite	Fluoride	Hardness	Metals	Fecal Coliform	Fecal Strep	Pest/PCB, EPA 608	Herb, EPA 8151	VOA, EPA 8260	Semis, EPA 8270
GWS-345B	TCT	6/8/2005 16:00		N						X	100 ml		1						X		X												

NOTES: Complete yellow shaded sections; each "X" needs to be circled.

Itemize requested Metals here:

COMMENTS: ****3-DAY TAT REQUESTED****

Relinquished By: (Signature)	Received By: (Signature)	Date	Time
[signature]	[signature]	6-9-05	0850
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time
Relinquished By: (Signature)	Received By: (Signature)	Date	Time

Form Revision 05; effective 03/15/2005

CODES: **REAL**=REAL ESTATE TRANSACTION **PRIV**=PRIVATE WELL SAMPLING BY REQUEST OR FOR REPAIR **NEW**=NEW WELL (PERMIT)

N.C. Department of Environment and Natural Resources
Division of Environmental Health

Inspection of Engineered Subsurface Wastewater System

Mecklenburg County **Health Department**	Shafer Residence **Name of Establishment**	345B **Permit/Project No.**
18217 Kalabash Rd. Charlotte 28278 **Location**	3-Bedroom House **Type of Establishment**	360 GPD **Design Flow**
Ronald Shafer **Owner/Agent**	Same as location address **Address**	(704) 588-3948 **Phone**
N/A **Operator**	N/A **Address**	N/A **Phone**
IIIb **System Type**	6/8/2005 **Date of Inspection**	May 2010 **Next Inspection Due**

	Yes	No	N/A	Comments:
1. ESTABLISHMENT:				
a. Type, size, and sewage flow in accordance with permit?	☒	☐	☐	
2. COLLECTION SYSTEM:				
a. No evidence of leaks into or out from sewer lines/manholes?	☒	☐	☐	
b. Free of blockages/solids buildup in lines or manholes?	☒	☐	☐	
3. TANKAGE: (Grease Traps/Lift Stations/Septic/Dosing Tanks)				
a. Tank risers accessible and surface water diverted?	☒	☐	☐	3.a. Leave riser for pump tank uncovered
b. Tanks and access manholes structurally sound, watertight?	☒	☐	☐	for access.
c. Sanitary tee(s) in good working condition?.....	☐	☐	☒	3.c. Sanitary tee not inspected.
d. Tanks pumped, cleaned out as needed?.....	☐	☒	☐	
4. RAW SEWAGE LIFT STATION (if present):				
a. Required pumps present, operating, and cycling properly	☐	☐	☒	
b. High-water alarm present and operating properly?	☐	☐	☒	
c. Floats/pipe/valves/disconnects in good condition?	☐	☐	☒	
5. EFFLUENT DOSING SYSTEM:				
a. Effluent appears clear, free of excess solids?	☒	☒	☐	5.a. Dosing tank was pumped out. Could not operate effluent pump.
A. PUMP SYSTEMS:				
a. Required pumps present, operating, and cycling properly?	☒	☐	☐	
b. High-water alarm present and operating properly?	☒	☐	☐	
c. Floats/pipe/valves/disconnects in good working condition?	☒	☐	☐	
d. Control panel enclosure/components in good condition?	☒	☐	☐	5.A.d. Corrosion inside control panel.
e. Elapsed time readings: _____ _____ _____ _____				
B. SIPHON SYSTEMS:				
a. No evidence of overflow or siphon leakage?	☐	☐	☒	
b. Siphon(s) appear to be working/alternating properly?	☐	☐	☒	
c. Bells and vents free of debris and in good condition?	☐	☐	☒	

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

F-I

Receipt Information

Date:	04/13/05
Receipt #:	33902
Check / Auth #:	CHECK 4306
Received By:	CRAIGGY

Amount:	85.00
Tendered:	85.00
Returned:	0.00

Account Information

Account #:	200000
Contractor:	SHAFER ANGELA K
Attn:	
Address:	18217 KALABASH RD
Address:	
City/State/Zip:	CHARLOTTE, NC 28278

Item	Description	Permit#	Quantity	Unit Price	Total Price
0743	Hmeownr Maint Inspec-Type IIIB FILE 345B/PH #704-588-3948		1	85.00	85.00

5/8/05

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

N. C. Department of Environment and Natural Resources
Division of Environmental Health

INSPECTION OF ENGINEERED SUBSURFACE WASTEWATER SYSTEM

Mecklenburg — Health Department
3455 — Permit/Project No.
18217 Kalabash Road — Location
residence — Name of Establishment / Type of Establishment
360 gpd — Design Flow
Ronald D. Shafer, 18217 Kalabash Road, Charlotte, NC 28278 — Owner/Agent / Address / Phone
None - III b — Operator / Address / Phone
Remarks

	Yes	No	REMARKS
1. ESTABLISHMENT: Type, size, and sewage flow in accordance with permit?	☐	☐	
2. COLLECTION SYSTEM: No evidence of leaks into or out from sewer lines/manholes?	☐	☐	
Free of blockages/solids buildup in lines or manholes?	☐	☐	
3. TANKAGE (Grease Traps/Lift Stations/Septic/Dosing Tanks): Tank risers accessible and surface water diverted?	☐	☑	Pump tank riser was covered, prevents access. Based upon two years worth of surveys, I would strongly recommend that you have both the septic as well as the pump tanks pumped out at this time. From my experience, tanks really need to be pumped every 3 years to keep the suspended solids out of the drainfield - this eliminates the possibility of subsequent clogging.
Tanks and access manholes structurally sound, watertight?	☑	☐	
Sanitary tee(s) in good working condition?	☑	☐	
Tanks pumped, cleaned out as needed?	☑	☐	
4. RAW SEWAGE LIFT STATION (if present): Required pumps present, operating, and cycling properly?	☐	☐	
High-water alarm present and operating properly?	☐	☐	
Floats/pipe/valves/disconnects in good working condition?	☐	☐	
Control panel enclosure/components in good condition?	☐	☐	
5. EFFLUENT DOSING SYSTEM: Effluent appears clear, free of excess solids?	☐	☐	
PUMP SYSTEMS: Required pumps present, operating, and cycling properly?	☑	☐	
High-water alarm present and operating properly?	☑	☐	
Floats/pipe/valves/disconnects in good working condition?	☑	☐	
Control panel enclosure/components in good condition?	☑	☐	
Elapsed time readings: _____ _____ _____ _____			
SIPHON SYSTEMS: No evidence of overflow or siphon leakage?	☐	☐	
Siphon(s) appear to be working/alternating properly?	☐	☐	
Bells and vents free of debris and in good condition?	☐	☐	
6. GROUND ABSORPTION FIELDS: No evidence of effluent surfacing/reaching surface waters?	☑	☐	Drainfield area should be protected as much as possible - a good grass cover is recommended. We have definitely seen our share of problems in the past that were related to traffic over the drain lines.
Minimal ponding in subsurface trenches?	☑	☐	
Surface water being effectively diverted away?	☑	☐	
Diversions/ditches/swales/tile drains properly maintained?	☐	☑	
Line cover/vegetation adequate/maintained as needed?	☐	☑	
Protected from traffic, destructive uses?	☑	☐	
Distribution devices in good condition, working properly?	☑	☐	
Repair area properly reserved, maintained?	☑	☐	
LOW-PRESSURE PIPE DRAIN FIELDS: Turnups/cleanouts/valves intact and accessible?	☐	☐	
No effluent standing in lower laterals?	☐	☐	
Laterals free of excess solids, cleaned out as needed?	☐	☐	
Pressure head is properly adjusted?	☐	☐	

OVERALL CONDITION AND OPERATION OF SYSTEM: No Sewage Surfacing.

SUMMARY OF IMPROVEMENTS NEEDED:

Improvement	Repair Within (Days)

DATE: 5-9-00 SIGNED: J B Thompson Jr. R.S. AGENT
Division of Environmental Health

DENR 3702 (Revised 3/98)
On-Site Wastewater Section (Review 12/98)

– over –

5-19-00 Notified Owner

Mecklenburg County Public Health Laboratory

Environmental Health Section

249 Billingsley Road • Charlotte, North Carolina 28211

Microbiological Analyses

111b

Owner, System or Establishment: Ronald Shafer

Address: 18217 Kalabash Rd

Charlotte, NC Zip: 28278

Collected By: L. Thompson

Date Collected: 5-8-00 Time: 11:50 AM (PM)

Sample Source: Outside tap

Date Delvd. to Lab: 5-8-00 Time: 2:58 AM (PM)

Delivered By: LBT ☑ Received on Ice Initials LBT

Type of Sample

Potable Water

- ☒ Individual Well
- ☐ Non-Community
- ☐ Community
- ☐ City
- ☐ Other (specify)

Treatment ☐ chlorinated ☒ nonchlorinated

- ☒ Initial Sample
- ☐ Recheck (chlorinated)
- ☐ Recheck (nonchlorinated)
- ☐ Other (specify) _____

Nonpotable Water

- ☐ Surface
- ☐ Storm
- ☐ Other (specify) _____

Analysis Requested: ☑ Total Coliform ☐ Fecal Coliform ☐ Fecal Strep ☐ Enterococcus

☐ Sulfate Reducing Bacteria ☐ Pseudomonas aeruginosa

☐ Other (specify) _____

☐ Food Analysis (specify) _____

Comments: _____

Laboratory Analysis Report

Method: _____ Membrane Filter ✓ Colilert _____ Multiple Tube Fermentation

Total Coliform Absent /100 ml.

Fecal Coliform Absent /100 ml.

Fecal Strep _____ /100 ml.

Enterococcus _____ /100 ml.

Non-Coliform _____ /100 ml.

Plate Count _____ /gm. or ml.

Coliform Count _____ /gm. or ml.

Pseudomonas aeruginosa _____ /100 ml.

Laboratory Comments:

Date Received: 5/8/00 Date Reported: 5/9/00

Received By: mcb Analyst: MB/WLB Lab #: 620

Laboratory Identification #: 37518 DEHNR Division of Laboratory Services
#: 449 DEM

L 1.14 1/92
Rev. 10/96
4319

White - Lab Report Copy Yellow - Lab File copy

Mecklenburg County
Health Department

May 19, 2000

Ronald D. and Angela K. Shafer
18217 Kalabash Road
Charlotte, NC 28278

Re: Water Sample Results/Septic Inspection

Dear Mr. and Mr.s Shafer:

Enclosed you will find the laboratory analysis of the well water sample that was collected at your residence on May 8, 2000 in addition to the subsurface wastewater system inspection results.

The laboratory analysis of the well water sample was reported to be negative for coliform bacteria. The inorganic water sample results are not yet available. I will forward a copy of those results to you just as soon as I receive them from the State Laboratory.

Your prompt attention to the suggested improvements to your septic system is appreciated. The recommendations that have been made are intended to protect your investment and minimize the possibility of a septic system malfunction.

If you have any questions concerning this matter, please contact me at 336-5568.

Sincerely,

L. B. Thompson, Jr., R.S.

Larry B. Thompson, Jr., R.S., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosures

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - NITRATE ONLY

Name of System: Shafer, Ronald D.
Address: 18217 Kalabash Rd.
Charlotte, NC **Zip:** 28278
County: MECKLENB

Report To: Mecklenburg Co. Env. Health
700 North Tryon Street
Charlotte, NC 28202
Courier: 05-16-21
ATTN: L. Thompson
(704) 336-5101

Source of Water: ground
Source of Sample:
Type of Sample: raw
Type of Treatment: none
Type of Analysis: Nitrate
Category: OTHER

Collected By: L. THOMPSON **Date:** 05/08/2000 **Time:** 11:50:00 AM
Location of sampling point: outside tap
Remarks: IIIb

Parameters	Results	Units	Date Analyzed:
Nitrite as N	<0.10	mg/l	05/09/2000
Nitrate as N	<1.0	mg/l	05/09/2000

EXPLANATION OF RESULTS:

Foster/Therapeutic Homes: Nitrate-N level acceptable if less than or equal to 10 mg/l
Private Well Guidelines: Nitrite-N level should be ≤ 1.0 mg/l and Nitrate-N ≤ 10.0 mg/l

Date Received: 05/09/2000 **Report Date:** 05/14/2000 **Reported By:**
Today's Date: 05/14/2000 **Reference:** 8571 **Sample Number:** AA37716

Mecklenburg County
Health Department

March 22, 2000

Ronald D. and Angela K. Shafer
18217 Kalabash Road
Charlotte, NC 28278

Dear Mr. and Mrs. Shafer:

This letter is being sent to all home/business owners in Mecklenburg County with septic tank systems that utilize pumps. In 1990 the North Carolina Administrative Code governing septic tank systems was amended to require routine maintenance and inspection of certain septic tank systems. Research conducted on septic tank systems has shown that properly maintained systems perform better and protect the home/business owner's investment. These State rule changes required local health departments to perform additional inspections without additional resources. During the 1998-99 budget hearings, the Mecklenburg County Board of County Commissioners (BOCC) approved user fees to offset costs and to allow the local health department to comply with mandatory enforcement requirements in the State regulations.

Since you have a pump system, these new rules and fee requirements affect you. The fee is $85.00 and is due upon receipt of this notice. We will visit your property and make assessments and recommendations for the continued efficient operation of your septic tank system. In addition, if you have a well, bacterial and inorganic samples will be collected to help assess the quality of your water supply source. The process, including fee assessment, will be repeated every five (5) years. The fee amount may change in the future.

We are excited about the interest and support demonstrated by the BOCC. Past performance in this area was more enforcement oriented rather than supportive. One of our goals is to establish our department as a resource to you to aid and assist you with this and related public health concerns. The inspection program and the water analysis are important to the health of you and your family. This is a very important initiative intended to protect the public's health while improving and preserving our groundwater resources.

Your prompt fee payment will activate our inspection process. Your comments and questions regarding this matter are encouraged and welcomed.

Sincerely,

L.B. Thompson, Jr., R.S.

Larry B. Thompson, Jr., R.S., Coordinator
Managed Systems Program
Individual Water and Wastewater Systems

Enclosure

cc: Fiscal Services Manager, HMHCS

INSPECTION STATEMENT

MECKLENBURG COUNTY HEALTH DEPARTMENT

Ronald D. and Angela K. Shafer
18217 Kalabash Road
Charlotte, NC 28278

Please Make Check Payable To

Mecklenburg County Health Department
700 N. Tryon Street, Ste 211
Charlotte, NC 28202

Note: THIS COMPLETED FORM MUST ACCOMPANY PAYMENT!

DESCRIPTION OF PROPERTY

Name	Site Address	Tax Parcel	File Number	System Type
Ronald and Angela Shafer	18217 Kalabash Road	217-181-44	345 B	IIIB

Total Amount Due: $85.00

Please use the space below, to make any corrections to property information.

Name _____

Site Address _____

_____

# of Bedrooms _____

BILL INFORMATION

Billing Date	Payment Due Date
3/23/00	4/21/00

Direct Questions Concerning This Bill To ..... (704) 336-5102

☐ *Please check if you have a well.*

Make Check Payable To Mecklenburg County Health Department
Your Canceled Check Is Your Receipt

DO NOT SEND CASH

345B/825A

420 PS 200 clk DT 12/16/93 CRT

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

PERSON FILING APPLICATION:
NAME: ~~[redacted]~~ MILLER (last) SHANNON (first) E. (mi)
ADDRESS: 21 QUAYSIDE CT PHONE: (803) 831-1852
CITY: LAKE WYLIE STATE: SC ZIPCODE: 29710

Date: 12/16/93

PROPERTY OWNER: SHAFER
NAME: ~~[redacted]~~ (last) RON (first) D. (mi)
ADDRESS: 13518 Greycoat Ct PHONE: (704) 588-4934
CITY: CHARLOTTE STATE: NC ZIPCODE: 28217

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 217-181-07 P.O.
STREET ADDRESS: 18217 KALABASH SC
ZONING:

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

LOT NUMBER: 59A LOT SIZE (in acres):

TYPE APPLICATION (check one):
[] SOIL TEST - INDIVIDUAL LOT (D)
[X] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [X] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER _____ (O)

NUMBER BEDROOMS: 3 NUMBER OCCUPANTS: 3
SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [X] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Ronald E Miller Date: 12/16/93

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...Approval for 3 bedroom home with left Pump required

[X] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Audrey J Kwan R.S. 2/22/94
Environmentalist Date

T. Walker R.S. for S. Daniel 2/22/94
Director or Authorized Section Head Date

WATER : 122791

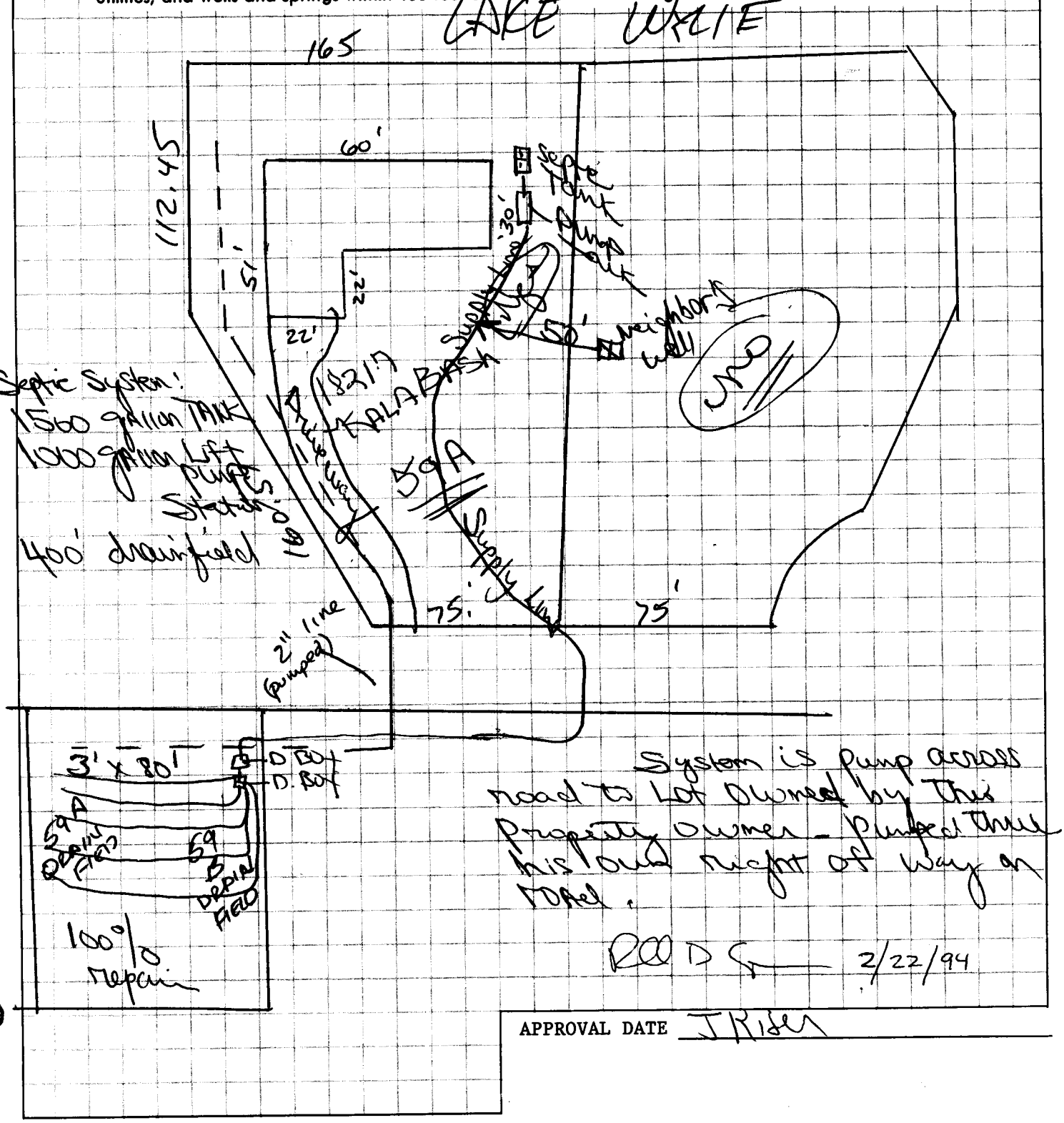
PROPOSED PLOT PLAN

HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 34SB1

TC: _____

Draw in and name all roads adjoining the property. Draw in and accurately dimension the lot concerned. Accurately indicate property boundaries, proposed and/or existing structures and driveways, underground utilities, and wells and springs within 100 feet of the proposed building or drainfield.



System is pump across road to Lot Owned by This Property owner - Pumped Thru his own right of Way on road.

RDD 2/22/94

APPROVAL DATE JTRiley

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

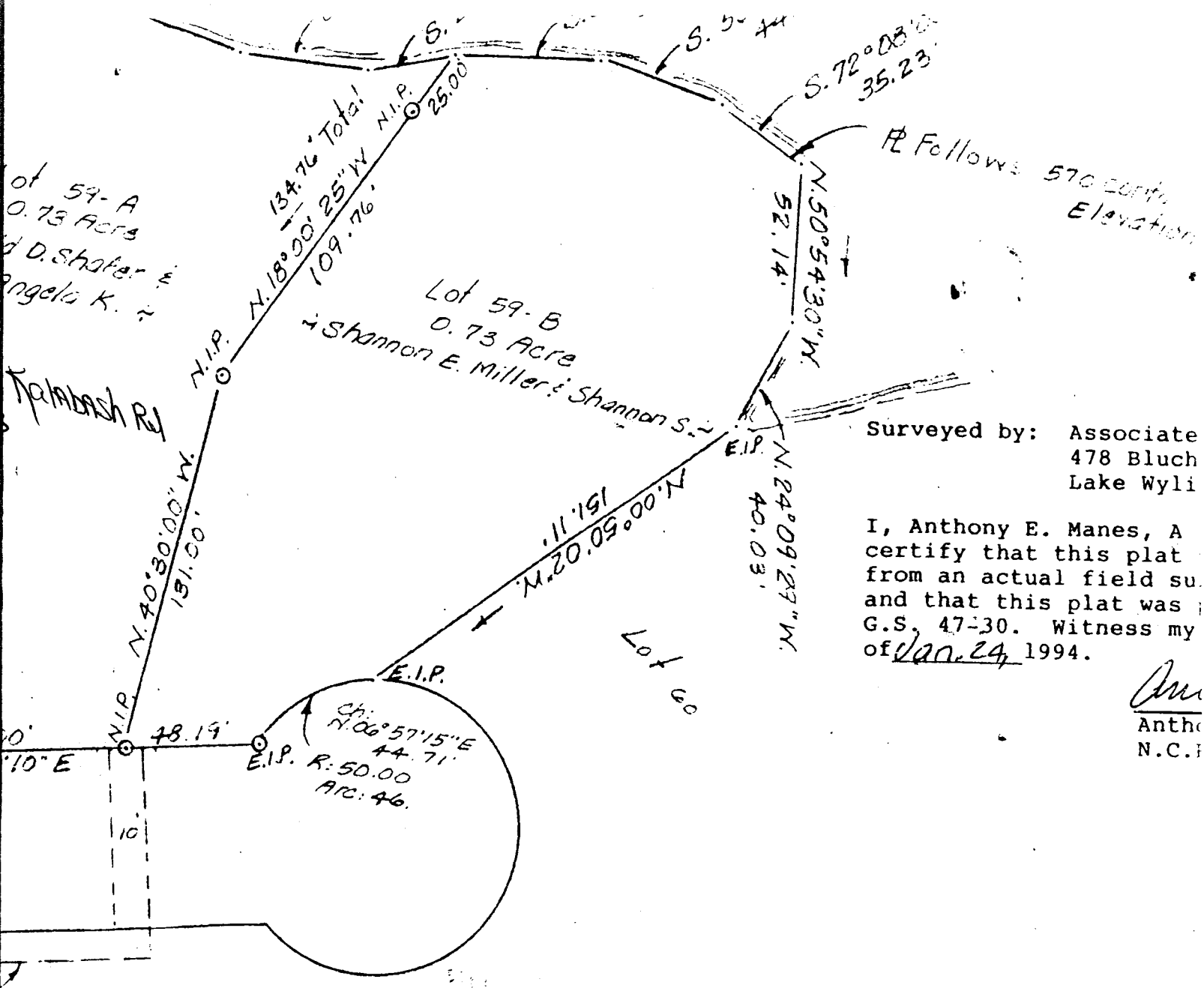
December 22, 1993

Memo to File: 8333A481B/8237A/345B
Property address shwon as 18225 Kalabash Road

From: Judy Kiser, R.S.

This property had an existing cabin that has been removed after the initial soils investigation. The lot has been subdivided into two lots. These lots are identified as 59A and 59B. The street address of 18225 is being removed as part of the address location until documentation is received from zoning (one lot may be allowed to retain this address or they may be issued new addresses).

The system location for both lots is located across the street from the site. It fronts on Kalabash Road also and is shown as file #481B/8353A.



Surveyed by: Associate
478 Bluch
Lake Wyli

I, Anthony E. Manes, A
certify that this plat
from an actual field su
and that this plat was
G.S. 47-30. Witness my
of Jan. 24 1994.

Anth
N.C.

I, JoAnn K. Smith (McAllister) a notary public f
the aforesaid state and county attest to the abo
by Anthony E. Manes, a N.C. Registered Land Surve
This 24th day of January 1994.

My Commission Expires: May 26, 2002 JoAnn K. S
Notary

Inc.

Vicinity Map
No Scale

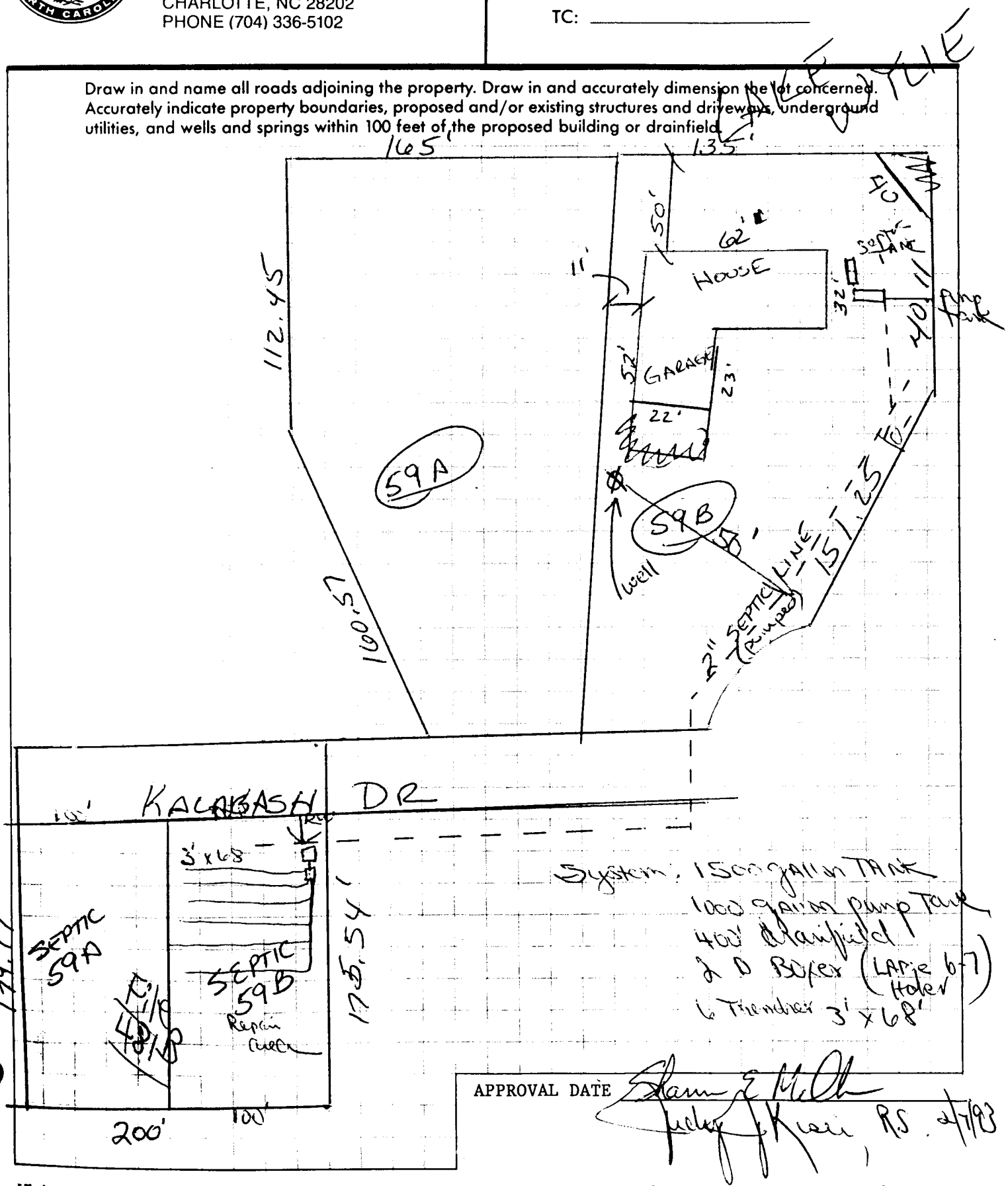
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ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 345B

TC: _____

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APPROVAL DATE Sharon E. McCall
Jackie J. Kraus R.S. 4/7/93

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

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345B

TO: ENVIRONMENTAL HEALTH DEPT.
BUILDING STANDARDS DEPT.
DEPT. OF ENVIRONMENTAL PROTECTION/
SOLID AND HAZARDOUS WASTE

DATE: 1/11/94

39A

FROM: COUNTY ENGINEERING DEPARTMENT

EHD FILE _____ JURISDICTION CODE Mck

PARCEL NUMBER 217-181-07 pd

ASSIGNED ADDRESS 18217 Kalabash Rd

EXISTING ADDRESS _____

PROJECT NAME NA

THE ABOVE DESCRIBED LOCATION HAS BEEN CHECKED CONCERNING:

		APPROVED	DISAPPROVED
1.	SUBDIVISION REGULATIONS		*
2.	FLOODWAY REGULATIONS		*
3.	EROSION CONTROL REGULATIONS		*
4.	PUBLIC UTILITY EASEMENT		*

		PRESENT	NOT PRESENT
5.	PUBLIC UTILITY EASEMENT	*	
6.	PROPERTY FRONTS ON THOROUGHFARE	*	
7.	DRIVEWAY PERMIT REQUIRED	*	

*If checked, further investigation will be required to determine whether a building permit can be issued by Building Standards for the site.

REMARKS: Septic tank

NOTE: THIS FORM MUST BE TURNED IN AT THE CASHIER'S OFFICE AT BUILDING STANDARDS WHEN PAYING PERMIT FEES.

A CERTIFICATE OF OCCUPANCY WILL NOT BE GRANTED UNTIL THE TRANSPORTATION DIVISION GRANTS FINAL APPROVAL ON DRIVEWAYS.

SIGNED: _____

OPWEAR 06-88

NEW ADDRESS _____*

FORM 100

Mecklenburg County

Health Department

Betty S. Snow, R.N., M.A.
Health Director

May 21, 1992

Shannon E. Miller
12041 Spinnaker Drive
Tega Cay, SC 29715

RE: Property located at ~~18225~~ Kalabash Road
FILE: 8237A/345B
PARCEL: 217-181-07po

Dear Ms. Miller:

At your request a soils investigation was conducted on the property designated above. Results of this investigation showed the site to be classified as **UNSUITABLE** under criteria as set forth in Section .1900 of the North Carolina Administrative Code, Title 10, Department of Human Resources, Chapter 10, Division of Health Services; Sanitary Engineering Section, Subchapter 10A, Sanitation. A copy of the Site Evaluation Report (Serial Number 12512) is enclosed.

The soil on this property is not suitable for use with any conventional, modified or alternative system of which I am aware. If you wish to exercise your right of appeal concerning the interpretation and enforcement of these rules you may do so in accordance with G.S. 150B and 10 NCAC 1B.

If there are any questions, please contact Bill Marlin at 336-5574.

Sincerely,

Gene Vaughan, R.S., Supervisor
Individual Water and Wastewater Systems

Enclosure

MECKLENBURG COUNTY ENVIRONMENTAL HEALTH
SITE EVALUATION REPORT
SERIAL NUMBER 12512

File: 345/B - 82371

Action 3

Parcel: PO 217-18-1041

☐ PC

Location: 10225 Kalabash Rd

Subdivision:

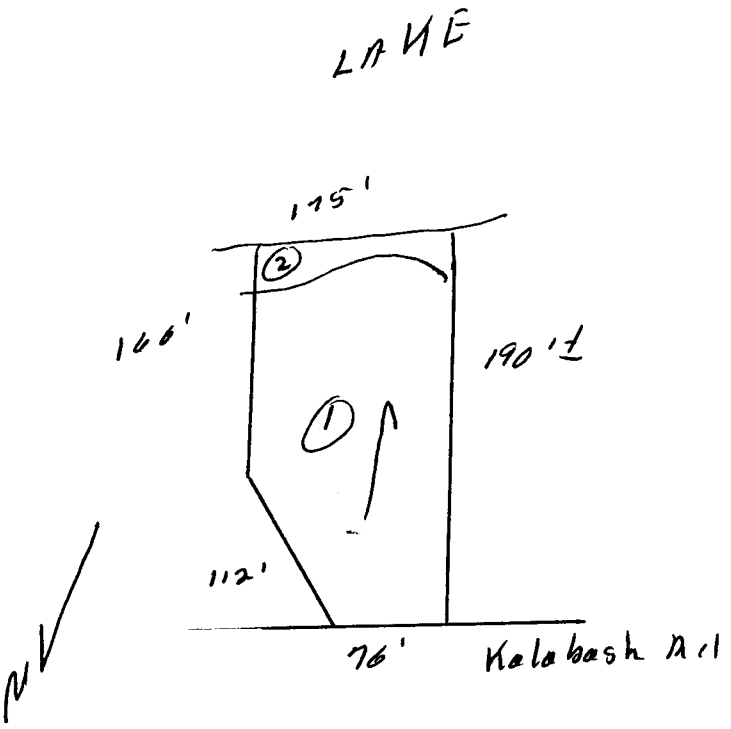
Lot: 59A Block: Acres: .73

Owner: Shannon E. Miller
Address: 12041 Spinnaker Dr.
Tega Cay, S.C. 29715

Comments: 100% Repair

Described by: William A. Martin

Date: 5-21-92



***** EVALUATION KEY *****

S = Suitable U = Unsuitable
PS = Provisionally Suitable
The "Area Classification" below indicates the suitability of areas in the diagram.

FACTORS	AREA 1	AREA 2	AREA 3	AREA 4	AREA 5	AREA 6
Topography	(S) PS U 2-10%	S PS (U) complex slopes	S PS U	S PS U	S PS U	S PS U
Texture	S (PS) U Expansive clay	S PS U	S PS U	S PS U	S PS U	S PS U
Structure	S (PS) U sub + Blocky	S PS U	S PS U	S PS U	S PS U	S PS U
Drainage	S (PS) U 736" to water	S PS U	S PS U	S PS U	S PS U	S PS U
Depth	S PS (U) 18-24"	S PS U	S PS U	S PS U	S PS U	S PS U
Restrictive Horizons	S (PS) U 736"	S PS U	S PS U	S PS U	S PS U	S PS U
Available Space	S PS (U)	S PS U	S PS U	S PS U	S PS U	S PS U
Other (specify)	S PS U	S PS U	S PS U	S PS U	S PS U	S PS U
Soil Group/Series	Vance-Lilo	complex slopes				
Area Classification	S PS (U)	S PS (U)	S PS U	S PS U	S PS U	S PS U

345B/823TA 05/06/92 #0449 $50.00

59A

INDIVIDUAL WATER AND WASTEWATER SYSTEMS PROGRAM
APPLICATION FOR SERVICES

[] CRT

Mecklenburg County Health Dept.
Environmental Health Division
c/o Hal Marshall Ctr., Suite 211
700 N. Tryon St.
Charlotte, NC 28202

(704)336-5102

Date: 5-6-92

PERSON FILING APPLICATION:
NAME: MILLER (last) SHANNON (first) E (mi)
ADDRESS: 12041 SPINNAKER DR PHONE: 803 548-1694
CITY: TEGA CAY STATE: SC ZIPCODE: 29715

PROPERTY INFORMATION (FROM ENGINEERING FORM):
TAX/PARCEL NUMBER: 217-181-7 P.O.
STREET ADDRESS: 18225 Kalabash Rd
ZONING: RESIDENTIAL

PROPERTY OWNER:
NAME: MILLER (last) SHANNON (first) E (mi) (LEASEHOLDER)
ADDRESS: 12041 SPINNAKER DR PHONE: 803 548-1694
CITY: TEGAC CAY STATE: SC ZIPCODE: 29715

SUBDIVISION OR MOBILE HOME PARK NAME:

Township (check one):
[X] 0 Mecklenburg County [] 2 Davidson [] 4 Pineville [] 6 Huntersville
[] 1 Charlotte [] 3 Cornelius [] 5 Matthews [] 7 Mint Hill

LOT NUMBER: 59A SECT 43 LOT SIZE (in acres): .73

TYPE APPLICATION (check one):
[X] SOIL TEST - INDIVIDUAL LOT (D)
[] NEW CONSTRUCTION ON VACANT LOT - 4 BEDROOMS OR LESS (N)
[] EXCHANGE MOBILE HOME - SAME # BEDROOMS (Y)
[] ADDITION - INCREASE ROOMS/OCCUPANCY/MOBILE HOME SIZE (A or M)
[] COMMERCIAL OR INDUSTRIAL (N)
[] SOIL TEST DEVELOPMENT (P)
[] ADDITION - GARAGE OR RENOVATION/NO MAJOR CHANGES (X)
[] MODIFIED /ALTERNATIVE/ OR RESIDENCE > 4 BEDROOMS (Z)
[] REPAIR TO SYSTEM (R)

RESIDENTIAL PROPERTY (Type Building, check one):
[] SINGLE MOBILE HOME (S) [] HOUSE (H) [] MULTIPLE FAMILY (U)
[] DOUBLE WIDE (D) [] MODULAR HOME (M) [] OTHER ____ (O)

NUMBER BEDROOMS: NUMBER OCCUPANTS:
SYSTEM CLASSIFICATION:

COMMERCIAL/INDUSTRIAL PROPERTY:
Type Business _____ # Employees ___ Per Shift ___ ___ ___
Industrial Wastes (Y/N) ___
Underground Storage Tanks On Property (Y/N) ___ Type _____

WATER SUPPLY (check one):
[] Community (C) [] Shared Well (S)
[] Municipal (M) [] Other 'spring' (O)
[] Private Well (P)

FUTURE ADDITIONS - ALL PLANNED ADDITIONS MUST BE ENTERED (check all that apply):
[] Swimming Pool [] Jacuzzi [] Stable/Barn [] Workshop [] None
[] Garage [] Storage Building [] Deck/Patio [] Bedrooms [] Other

The undersigned, owner, or legal agent for the owner, of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY HEALTH DEPARTMENT to enter onto the property for the purpose of processing this request.

Signed: Shannon E. Miller Date: 5/6/92

NOTICE:

The undersigned, an authorized agent of the MECKLENBURG COUNTY HEALTH DEPARTMENT, certifies that the Department has approved the the Request for the Job Location contained in this document. This approval is granted in accordance with the provisions of Laws And Rules For Sanitary Sewage Collection, Treatment And Disposal in effect at the time of issuance of the permit and is subject to the following provisions:

...No work shall be conducted on the septic tank system until an installation, Construction, Alteration and/or Repair approval is granted by this Department.

...This permit is not transferable.

...

[] IMPROVEMENT PERMIT - VALID 60 MONTHS FROM ISSUANCE
[] MOBILE HOME EXCHANGE APPROVAL - VALID 6 MONTHS FROM ISSUANCE
[] ADDITION/RENOVATION APPROVAL - VALID 1 YEAR FROM ISSUANCE

Environmentalist Date

Director or Authorized Section Head Date

WWATER : 122791

TAX LINE 217-181-7 P.O.

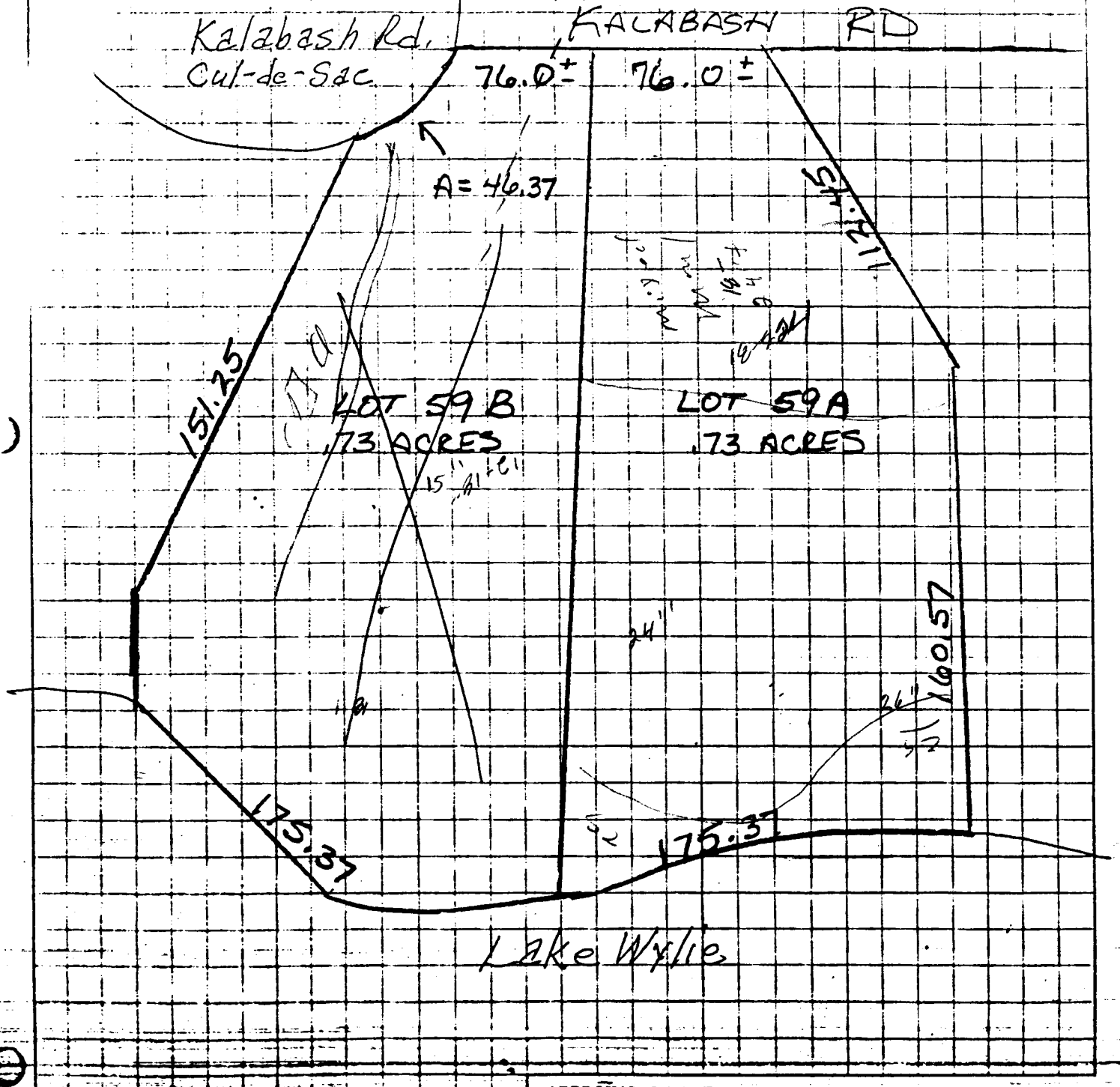
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
700 NORTH TRYON STREET
CHARLOTTE, NC 28202
PHONE (704) 336-5102

FILE: 345B/8237A 59A

TC: 217-181-7 P.O.

5-6-92

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APPROVAL DATE

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

SOIL AND SITE REPORT FOR SUITABILITY FOR A GROUND ABSORPTION WASTEWATER SYSTEM

by

JOE LYNN, REGIONAL SOIL SPECIALIST
ON-SITE WASTEWATER SECTION
DIVISION OF ENVIRONMENTAL HEALTH

Submitted to:

WILLIAM MARLIN
SOIL SCIENTIST
MECKLENBURG COUNTY HEALTH DEPARTMENT

JANUARY 13, 1993

Joe Lynn
Regional Soil Specialist
Joe Lynn

INTRODUCTION

This site is **UNSUITABLE** for ground absorption sewage treatment and disposal systems under current laws and rules 15A NCAC 18A .1900. **No wasterwater system can be permitted on this site.**

Conventional systems	NO
Shallow conventional systems	NO
Large Diameter Pipe systems	NO
Prefabricated Porous Block Panel systems	NO
Low Pressure Pipe Systems	NO
Fill Systems	NO
Aerobic Treatment Systems	NO

This report gives a brief summary of the findings, conclusions, and recommendations.

If you have any questions or I can be of assistance contact me at the Mooresville Regional Office (704) 663-1699.

SOIL/SITE REPORT

GENERAL INFORMATION

COUNTY: Mecklenburg **DATE:** January 13, 1993

OWNER/APPLICANT: Crescent Resources, Inc. / Shannon Miller

LOCATION: Kalabash Road, Recreation lot # 59

TYPE OF FACILITY: Residence **DESIGN UNIT:** 720 gpd / 2 lots

PROPOSED WATER SUPPLY: On-Site well

EVALUATED BY: Joe Lynn assisted by William Marlin using hand augers

DATE OF EVALUATION: December 14, 1993

OTHER(S) PRESENT: N/A

SITE INFORMATION

AREA/PRESENT USE: .73 acres / lake cabin, many of the trees had recently been cut

TOPOGRAPHY: 8 to 21 percent

LANDSCAPE POSITION: Nose, linear, and foot slopes

SITE LIMITATIONS: Lake, gullies, depressions, old road, desire to divide site into two lots

SOIL INFORMATION

SOIL TEXTURE: (surface) Sandy loam / sandy clay loam / sandy clay
(subsoil) Sandy clay / clay

SOIL STRUCTURE: (subsoil) Blocky

CLAY MINERALOGY: Expansive

SOIL DEPTH: 0 to 20 inches to unsuitable soil condition

SOIL WETNESS: 16 to 30 inches to chromas of 2 or less

RESTRICTIVE HORIZONS: None

SAPROLITE: 16 to 30 inches to unsuitable saprolite

AREA of S or PS SOIL: None found

CONCLUSIONS

This site is unsuitable for the installation of a conventional ground absorption sewage system due to:

1. Unsuitable Topography and Landscape Position — Section .1940
   Drainage features (gullies) and depressions
2. Unsuitable Soil Characteristics — Section .1941
   Expansive clay mineralogy
3. Unsuitable Soil Wetness — Section .1942
   Chromas of 2 or less from Munsell Color Book
4. Insufficient Soil Depth — Section .1943
   Soil depths of less than 36 inches.
5. Insufficient Available Space — Section .1945
   Not enough area for an initial sewage system and a repair.

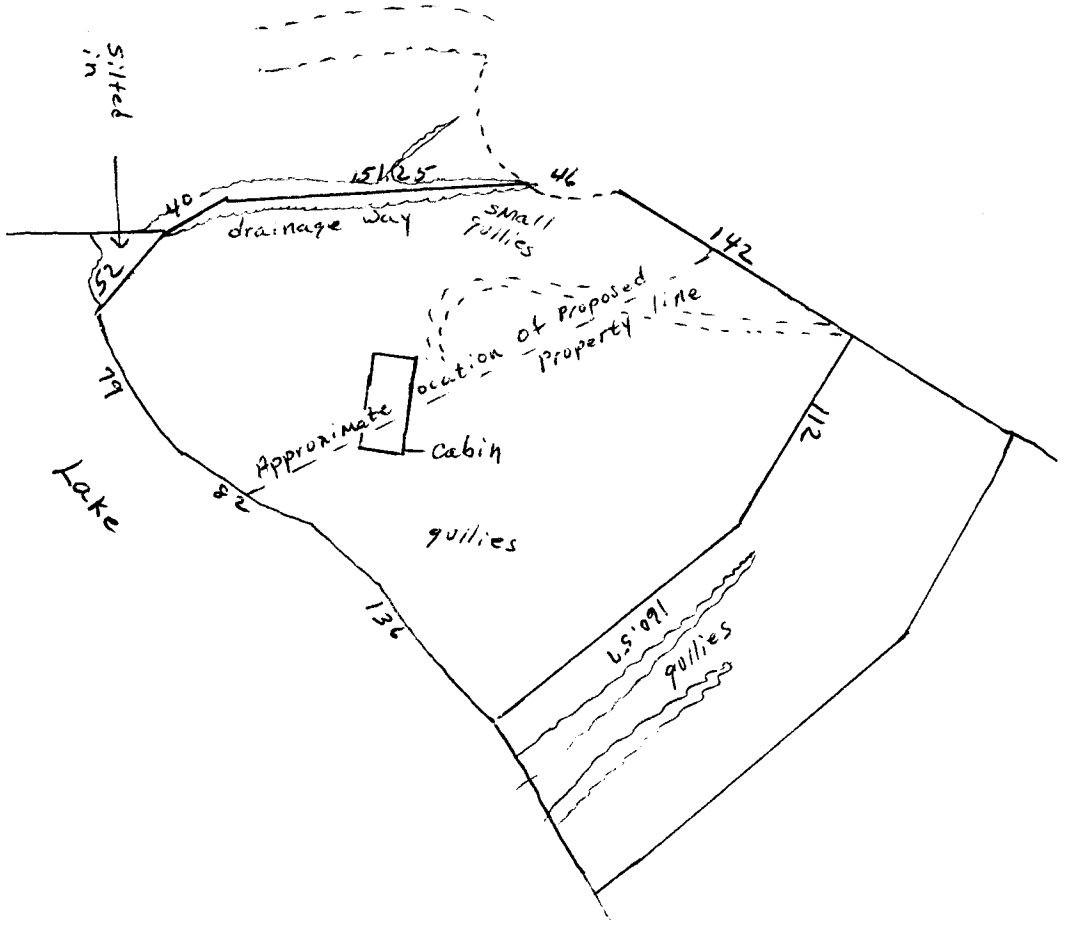
The site is Unsuitable under Rule .1956 Modifications to Septic Tank Systems. Neither shallow trenches, large diameter pipe, nor porous block panel systems are options for this site. The saprolite is unsuitable by this rule. Drainage will not be sufficient to reclassify the site.

The site is Unsuitable under Rule .1957 Alternative Sewage Systems. Neither a low pressure pipe system, fill system, nor an aerobic treatment unit are options for this site.

RECOMMENDATIONS

The owner has the following options that might allow the use of this property as desired:

1. She may purchase other Suitable or Provisionally Suitable property to place the ground absorption sewage system on.
2. She may obtain an easement on a Suitable or Provisionally Suitable property to place the ground absorption sewage system on.
3. The Division of Environmental Management in Mooresville, N. C. at (704) 663-1699 may be contacted to pursue options available through that office. Surface drip irrigation might be a possibility.
4. A sewage system can be pursued under Rule 1957 (c). Written documentation must be submitted to your office showing that the proposed sewage system can be expected to function properly. The data must contain the following:
   A. The effluent must receive adequate treatment.
   B. The ground water and the surface water must not be contaminated by the effluent.
   C. The effluent must not be exposed to the ground surface or discharged to surface waters where it could come into contact with people, animals, or vectors.
5. The denial can be appealed under G. S. 130A-24 if requested within 60 days of the denial date.


silted in
15
25
46
40
drainage way
small gullies
142
52
location of proposed property line
79
Approximate
Cabin
211
Lake
82
gullies
136
U.S. 91
gullies

original

345B/823TA 05/06/92 #0449 $50.00

59A

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WWATER : 122791

TAX MAP 217-181-7 P.O.

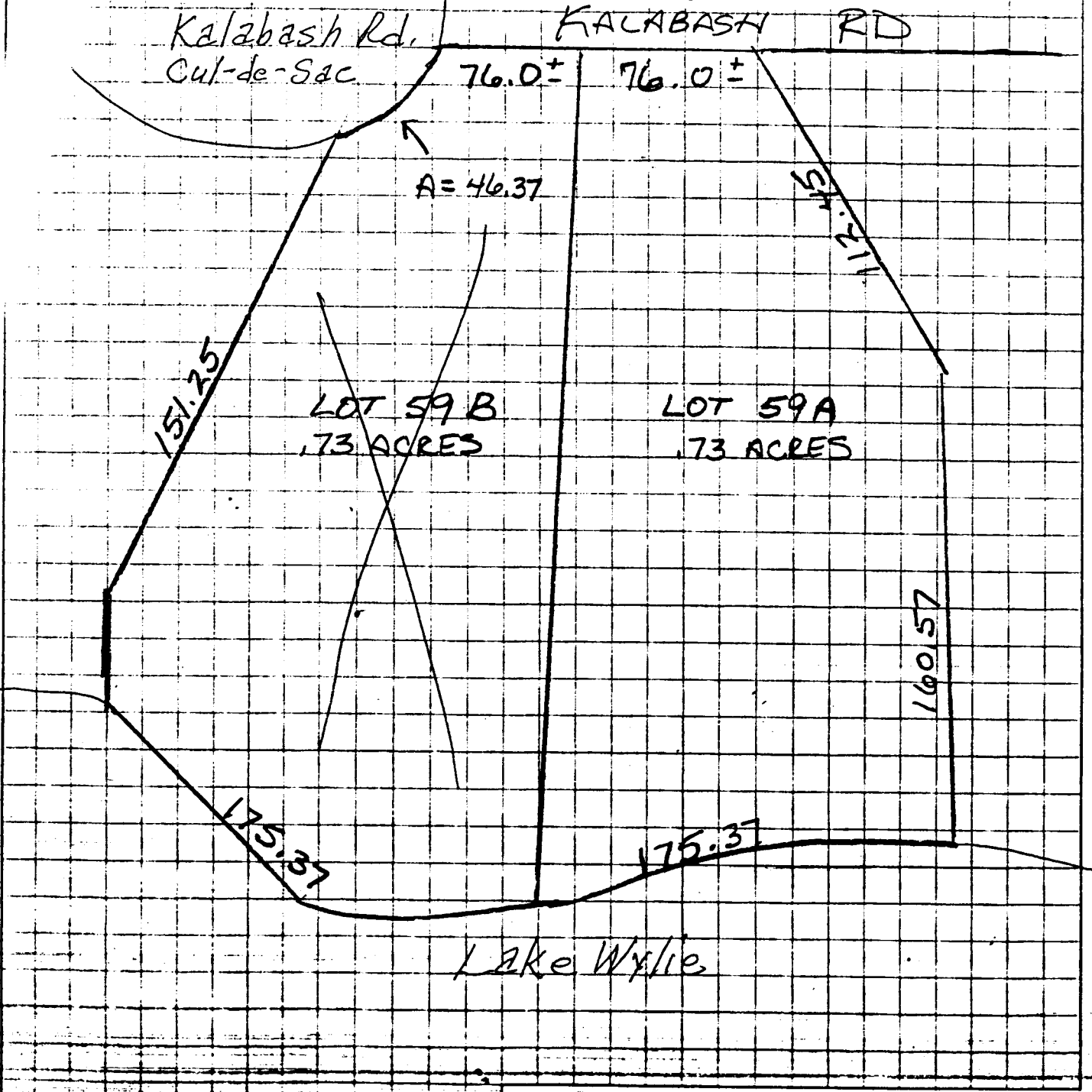
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FILE: 3458|8831A 59A

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APPROVAL DATE

White - Health Department's Copy Canary - Environmentalist's Copy Pink - Owner's Copy

N.C. Department of Environment and Natural Resources
Division of Environmental Health

Inspection of Engineered Subsurface Wastewater System

Mecklenburg County **Health Department**	SHAFER RESIDENCE **Name of Establishment**	345B **Permit/Project No.**
18217 KALABASH RD **Location**	RESIDENCE **Type of Establishment**	360 **Design Flow**
RONALD AND ANGELA SHAFER **Owner/Agent**	18217 KALABASH RD **Address**	**Phone**
Operator	CHARLOTTE NC 28278 **Address**	**Phone**
IIIb **System Type**	6/14/2010 **Date of Inspection**	6/14/2015 **Next Inspection Due**

	Yes	No	N/A	Comments:
1. ESTABLISHMENT:				
a. Type, size, and sewage flow in accordance with permit?	☒	☐	☐	
2. COLLECTION SYSTEM:				
a. No evidence of leaks into or out from sewer lines/manholes?	☐	☐	☒	
b. Free of blockages/solids buildup in lines or manholes?	☐	☐	☒	
3. TANKAGE: (Grease Traps/Lift Stations/Septic/Dosing Tanks)				
a. Tank risers accessible and surface water diverted?	☒	☐	☐	
b. Tanks and access manholes structurally sound, watertight?	☒	☐	☐	
c. Sanitary tee(s) in good working condition?.....	☐	☐	☒	3.c. Sanitary tee not inspected.
d. Tanks pumped, cleaned out as needed?.....	☐	☐	☒	NOT INSPECTED
4. RAW SEWAGE LIFT STATION (if present):				
a. Required pumps present, operating, and cycling properly	☐	☐	☒	
b. High-water alarm present and operating properly?	☐	☐	☒	
c. Floats/pipe/valves/disconnects in good condition?	☐	☐	☒	
5. EFFLUENT DOSING SYSTEM:				
a. Effluent appears clear, free of excess solids?	☐	☐	☒	
A. PUMP SYSTEMS:				
a. Required pumps present, operating, and cycling properly?	☐	☐	☐	INACCESSIBLE
b. High-water alarm present and operating properly?	☐	☐	☐	"
c. Floats/pipe/valves/disconnects in good working condition?	☐	☐	☐	"
d. Control panel enclosure/components in good condition?	☐	☐	☐	"
e. Elapsed time readings: _____ _____ _____ _____				
B. SIPHON SYSTEMS:				
a. No evidence of overflow or siphon leakage?	☐	☐	☒	
b. Siphon(s) appear to be working/alternating properly?	☐	☐	☒	
c. Bells and vents free of debris and in good condition?	☐	☐	☒	

	Yes	No	N/A	Comments:
6. GROUND ABSORPTION FIELDS:				
a. No evidence of effluent surfacing/reaching surface waters?	☒	☐	☐	
b. Minimal ponding in subsurface trenches?	☒	☐	☐	
c. Surface water being effectively diverted away?	☒	☐	☐	
d. Diversions/ditches/swales/tiles drains properly maintained?	☒	☐	☐	
e. Line cover/vegetation adequate/maintained as needed?	☒	☐	☐	
f. Protected from traffic, destructive uses?	☒	☐	☐	
g. Distribution devices in good condition, working properly?	☒	☐	☐	
h. Repair area properly reserved, maintained?	☒	☐	☐	
A. LOW PRESSURE PIPE DRAIN FIELDS:				
a. Turnups/cleanouts/valves intact and accessible?	☐	☐	☒	
b. No effluent standing in lower laterals?	☐	☐	☒	
c. Laterals free of excess solids, cleaned out as needed?	☐	☐	☒	
d. Pressure head is properly adjusted?	☐	☐	☒	

OVERALL CONDITION AND OPERATION OF SYSTEM:

GOOD

SUMMARY OF REPAIRS REQUIRED AT THIS TIME:

***REPAIR WITHIN DAYS.**

SYSTEM MAINTENANCE/IMPROVEMENTS REQUIRED:

*The MCHD recommends having the tanks (septic & dosing) pumped out every 3 to 5 years to remove excess solids.

*Please visit http://groundwater.charmeck.org for additional information.

DATE: 6/14/2010

SIGNED: Philo Walker RS AGENT

Division of Environmental Health

Printed Name: PHILO WALKER RS

Phone #:

Real Estate Lookup

Print

Close

Parcel Information

Parcel ID	Account	Parent	Previous
21718144	INDIVIDUAL	21718107	21718144

Owner(s)

Owner Name	Mailing Address	City/State
SHAFER RONALD D	18217 KALABASH RD	CHARLOTTE NC 28278
SHAFER ANGELA K WIFE	18217 KALABASH RD	CHARLOTTE NC 28278

Legal Information

Legal	Municipality	Annexed	Special District	Fire District	Acreage
L59A M51-45	MECKLENBURG COUNTY-UNINCORPORATED		FIRE SERVICE A	STEELE CREEK #2	0.68

Total Parcel Assessment & Exemptions

Building	Land	Features	Total	Exemption	Year Approved	Review Date	Amount
159500	144000	6800	310300				

Sales Information

Sale	Price	Stamps	Qualify	V/I	DeedBook	Type	Legal Ref.	Grantor
Feb 25 1994	0			VAC	07679 - 396	DEED STAMPS	07679-396	

Land Use

Use	Units	Type	Neighborhood	Assessment
R122	1.00	WF	V701	144000

Building Information

Bldg	Description	Type	Year Built	Property Location
1	Single-Fam	RES	1995	18217 KALABASH RD UNINC

Bldg	Story	Units	Total SqFt	Heated	Foundation	Ext. Wall	Grade	Value
1	1 STORY	1	4568	1701	CRAWL SPACE	FACE BRICK -	AVERAGE 04	159500

Bldg	Heat	Fuel	FirePlace	AC	Fixtures	Bedrooms	Full Baths	3/4 Baths	1/2 Baths
1	AIR-DUCTED	GAS		AC-CENTRAL		2	2		0

Sub Areas

Bldg	Description	Size
1	BASE (FIRST FLOOR)	1701
1	PORCH - OPEN - FINISHED	160
1	GARAGE - FINISHED	506
1	PORCH - OPEN - FINISHED	234
1	BASEMENT - UNFINISHED	1647
1	PORCH - OPEN - FINISHED	320

Depreciation

Bldg	Physical	Functional	Economic	Special	Override
1	AV - 6.00%				

Special Features & Yard Items

Bldg	Built	Type	Quantity	Units	Value
1	1995	PIER	1	264	2400
1	1995	DOCK	1	256	3100
1	1995	DECK	1	10X16	1300

Value Changes

Notice Date	Tax Year	Reason	Changed To	Deferred
Jan 17 2003	2003	Countywide Revaluation	310300	0
Mar 20 1998	1998	Countywide Revaluation	283100	
Mar 22 1996	1996	New Improvement	240650	
Apr 14 1995	1995	Division of Land and/or New Parcel	110000	
Apr 14 1995	1995	Division of Real Estate and/or New Parce	110000	

SHANNON E. MILLER and wife, SHANNON S. MILLER;
and RONALD D. SHAFER and wife, ANGELA K. SHAFER

hereinafter "Grantee" (whether one or more, individual or corporation);

27/93 16:14
:0461 16.00
292.00 ***

WITNESSETH:

That the said Grantor in consideration of the sum of Ten ($10.00) Dollars and other good and valuable consideration to it paid, the receipt of which is hereby acknowledged, has bargained and sold and by these presents does grant, bargain, sell and convey unto the said Grantee and Grantee's heirs, successors and assigns, all of that certain tract of land situate, lying and being in Mecklenburg County, State of North Carolina, said land being more particularly described as follows:

"SEE EXHIBIT A HERETO ATTACHED"

MECKLENBURG COUNTY

[redacted]

STATE OF NORTH CAROLINA

Real Esta
Excise Ta

This conveyance is made subject to the following easements, reservations, conditions and restrictions:

1. That said lot shall be used only for single family recreation and/or single family residence purposes;

2. That not more than one private single family residential dwelling, together with accessory buildings and facilities normally incident to a private single family residential home site shall be constructed upon the said lot;

3. Said lot shall not be used for business, commercial, industrial, condominium, apartment or other multi-family residential uses;

4. Subdivision of the land conveyed by this deed into two or more lots is expressly prohibited except where:

A. Every lot resulting from such subdivision shall contain at least 30,000 square feet in area; and

B. Every lot resulting from such subdivision, if any part of any boundary line of that lot is within one hundred fifty (150') feet distance from one of the Catawba River lakes, shall have a lake or water front width of seventy-five (75') feet or more. The lake or water front width shall be measured on a straight line between the two points at which the side lines of said lot intersect with Duke Power Company's lake property;

5. No part of any building shall be constructed nearer than ten (10') feet from any lot line or nearer than fifty (50') feet from the contour shown on the aforesaid map; provided, however, existing buildings located on the land conveyed hereby may remain where they are;

6. No trucks, trailers or other vehicles (other than permanently installed mobile homes) shall be placed upon said lot and used as a building;

0000 7275 0380

compensation or otherwise, provided that this provision shall not preclude normal visiting by and entertainment of Grantee's nonpaying guests, and provided further, that this provision shall not preclude Grantee's leasing his single family residential building to a third party for use in compliance with the restrictions herein contained;

11. Any water system used to supply said lot shall comply with the regulations of local Health Departments and the State Board of Health;

12. Grantor reserves unto Duke Power Company, its successors and assigns, an easement over a ten-foot (10') wide strip of land across said lot, said strip adjoining the road contiguous to said lot and said road being the road shown on the recorded map, for the installation, maintenance and operation of utilities, including electric, telephone, radio and television transmission cables, and other service facilities, together with the accessory right to locate guy wires, braces or anchors, and to cut, trim or remove trees and plantings wherever necessary upon said lot in connection with such installation, maintenance and operation;

13. Grantor reserves unto Duke Power Company, its successors and assigns, an easement for the maintenance and operation of any existing electric distribution lines that may be located upon said lot and not located in the ten foot (10') easement described above, together with the right to cut, trim or remove any trees and plantings wherever necessary in connection with such maintenance and operation;

14. Grantor reserves for itself, its successors and assigns, an easement over a ten-foot wide strip running along the inside of all side lot lines of said lot together with the right to, but not the obligation to, construct and maintain drainage ditches, slopes or storm sewers. In the event that Grantee has now a presently existing structure on said strip, then the strip shall detour around said structure (keeping within the aforesaid lot lines and having a ten-foot (10') width from the edge of the structure) and except for said detour, run along said side lot lines with said ten-foot width;

15. Grantor reserves unto Duke Power Company, its successors and assigns, the right to deposit by air upon the land herein conveyed any emissions arising from or associated with the operation of the electric power plant or plants now constructed or to be constructed on the Catawba River or its tributaries by the said Company;

16. No owner of said lot shall have any claim or cause of action against Grantor, its affiliates or its licensees arising out of the exercise or non-exercise of any easement or other right reserved hereunder or referred to herein except in cases of willful or wanton misconduct;

17. No delay or failure on the part of an aggrieved party to invoke an available remedy in respect to a violation of any provision contained herein or referred to herein shall be held to be a waiver by that party of any right available to him upon the recurrence or continuance of said violation or the occurrence of a different violation;

18. In the event Duke Power Company, its successors or assigns, hereinafter acquires title to the property conveyed hereby, none of the restrictions, easements, conditions, or reservations herein contained shall preclude or be construed to preclude said Company from using said property for any of the following purposes: (1) electric generating plant(s) including ancillary facilities for construction and operation of the electric generating plant(s); (2) electric substation(s) and transmission lines, together with necessary rights of way for the construction of said substation(s) and lines and ingress and egress thereto; (3) "Exclusion Area(s)" as now or hereinafter defined in 10 CFR § 100.3, as amended; (4) sewer line(s); and (5) water supply line(s); and

19. Every restriction, easement, condition and reservation set out herein or referred to herein is hereby declared to be independent of and severable from each other, and if any of same shall be held by a court of competent jurisdiction to be invalid or unenforceable all the remainder of said easements, conditions, reservations and restrictions shall continue unimpaired and in full force and effect.

20. If an existing access road crosses the lot herein conveyed, the right of ingress and egress over said road is reserved for the purchasers of recreational lots served by said road, their heirs, successors and assigns, and for Grantor, its successors and assigns, until such time as roadways are constructed within the road rights of way designated as access roads on the recorded maps of Grantor for the section and lot herein conveyed.

filed in the office of the North Carolina Secretary of State, hereinafter called "Grantor," to

SHANNON E. MILLER and wife, SHANNON S. MILLER;
and RONALD D. SHAFER and wife, ANGELA K. SHAFER

herein... "Grantee" (whether one or more, individual or corporation);

/27/93 16:14
$:0461 16.00
292.00 ***

WITNESSETH:

That the said Grantor in consideration of the sum of Ten ($10.00) Dollars and other good and valuable consideration to it paid, the receipt of which is hereby acknowledged, has bargained and sold and by these presents does grant, bargain, sell and convey unto the said Grantee and Grantee's heirs, successors and assigns, all of that certain tract of land situate, lying and being in Mecklenburg County, State of North Carolina, said land being more particularly described as follows:

"SEE EXHIBIT A HERETO ATTACHED"

MECKLENBURG COUNTY

STATE OF NORTH CAROLINA

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A. Every lot resulting from such subdivision shall contain at least 30,000 square feet in area; and

B. Every lot resulting from such subdivision, if any part of any boundary line of that lot is within one hundred fifty (150') feet distance from one of the Catawba River lakes, shall have a lake or water front width of seventy-five (75') feet or more. The lake or water front width shall be measured on a straight line between the two points at which the side lines of said lot intersect with Duke Power Company's lake property;

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217-181-44

Ronald O. Shafer
& Angela K.
18217 Kalabash Rd
Charlotte, NC 28278